

Rec'd PCT/PTO 03 MAY 2005

10/533697

PTO/SB/01 (8-96)

Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCEPlease type a plus sign (+) inside this box →

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

Declaration OR Declaration
Submitted Submitted after
with Initial Filing Initial Filing

Attorney Docket Number	SERVIER 457 PCT
First Named Inventor	
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled :

Pyridopyrimidinone compounds ✓

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY)

11/04/2003 ✓

as United States Application Number or PCT International

Application Number

PCT/FR2003/003274 and was amended on (MM/DD/YYYY)
PCT/FR2003/03274

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			YES	NO
02.13804 ✓	FRANCE ✓	11/05/2002	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Rec'd PCT/PTO 03 MAY 2005

10/533697

Please type a plus sign (+) inside this box →

Approved for use through 9/30/98. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.**DECLARATION**

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: **CUSTOMER NUMBER: 25,666**

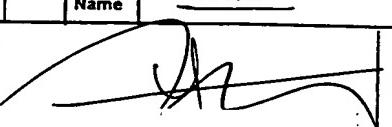
Name	Registration Number	Name	Registration Number
G. PATRICK SAGE	37,710	MICHELE CUDAHY	55,093

Additional registered practitioner(s) named on a supplemental sheet attached hereto.

Direct all correspondence to:

THE FIRM OF
HUESCHEN AND SAGE
 PLLC
 ATTORNEYS AND COUNSELORS
 500 COLUMBIA PLAZA
 350 EAST MICHIGAN AVENUE
 KALAMAZOO, MICHIGAN 49007-3856

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name	Sylvain	Middle Initial	Family Name	RAULT	Suffix e.g. Jr.		
Inventor's Signature					Date	April 14, 2005	
Residence: City	MOULT	FR	State	FR	Country	FRANCE	Citizenship
Post Office Address	Route de Saint-Pierre sur Dives						
Post Office Address							
City	MOULT	State	FR	Zip	14370	Country	FRANCE
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto							

Rec'd PCT/PTO 03 MAY 2005
10/533697

Please type a plus sign (+) inside this box →

Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

+

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Jean-Charles	Middle Initial		Family Name	LANCELOT	Suffix e.g. Jr.	
Inventor's Signature	<i>Jean-Charles Lancelot</i>				Date	April 14, 2005	
Residence: City	LE BOURG	State	FR	Country	FRANCE	Citizenship	FR
Post Office Address	Tour en Bessin RN 131						
Post Office Address							
City	LE BOURG	State	FR	Zip	14400	Country	FRANCE
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Marina	Middle Initial		Family Name	KOPP	Suffix e.g. Jr.	
Inventor's Signature	<i>Marina Kopp</i>				Date	April 14, 2005	
Residence: City	CAEN	State	FR	Country	FRANCE	Citizenship	FR
Post Office Address	42, rue de Lebissey						
Post Office Address							
City	CAEN	State	FR	Zip	14000	Country	FRANCE
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Daniel-Henri	Middle Initial		Family Name	CAIGNARD	Suffix e.g. Jr.	
Inventor's Signature	<i>Daniel-Henri CAIGNARD</i>				Date	April 14, 2005	
Residence: City	LE PECQ	State	FR	Country	FRANCE	Citizenship	FR
Post Office Address	22, avenue de la République						
Post Office Address							
City	LE PECQ	State	FR	Zip	78230	Country	FRANCE
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Bruno	Middle Initial		Family Name	PFEIFFER	Suffix e.g. Jr.	
Inventor's Signature	<i>Bruno PFEIFFER</i>				Date	April 14, 2005	
Residence: City	SAINT LEU LA FORET	State	FR	Country	FRANCE	Citizenship	FR
Post Office Address	47, rue Ernest Renan						
Post Office Address							
City	SAINT LEU LA FORET	State	FR	Zip	95320	Country	FRANCE
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto							

BEST AVAILABLE COPY

(January 1997)

Rec'd PCT/PTO 03 MAY 2005

10/533697

Please type a plus sign (+) inside this box →

Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Pierre	Middle Initial		Family Name	RENAUD	Suffix e.g. Jr.	
Inventor's Signature	<i>Pierre RENAUD</i>				Date	April 14, 2005	
Residence: City	LE CHESNAY	FRX	State FR	Country FRANCE	Citizenship	FR	
Post Office Address	3, avenue du Parc						
Post Office Address							
City	LE CHESNAY	State FR	Zip 78150	Country FRANCE			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State	Zip		Country		
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State	Zip		Country		
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State	Zip		Country		
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto							

BEST AVAILABLE COPY